

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	W.H.		10/01/01
O.I.P.E. CLASSIFIER			10-12-01
FORMALITY REVIEW	A.G.	640	10-24-01
RESPONSE FORMALITY REVIEW	Q.I.	825	2/07/02

### INDEX OF CLAIMS

✓	..... Rejected	N	..... Non-elected
==	..... Allowed	I	..... Interference
-	(Through numeral).... Canceled	A	..... Appeal
÷	..... Restricted	O	..... Objected

Claim	Date
Final	
Original	9/1/02
1	7/2/05
2	
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6	✓
7	✓
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10	✓
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28	✓
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32	✓
33	✓
34	✓
35	✓
36	✓
37	✓
38	✓
39	✓
40	✓
41	✓
42	✓
43	✓
44	✓
45	✓
46	✓
47	✓
48	✓
49	✓
50	✓

Claim	Date
Final	
Original	7/12/05
51	✓
52	✓
53	✓
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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